

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2005</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 55106(71699)	
Application Number 09/663,989-Conf. #4542		Filed	September 18, 2000
For <b>METHODS AND SYSTEMS FOR IMAGE- GUIDED SURGICAL INTERVENTIONS</b>			
Art Unit 3737	Examiner W. C. Jung		

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. *Applicants also conditional petition for additional time, if required.*

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 510.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$

Applicant claims small entity status. See 37 CFR 1.27.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director has already been authorized to charge fees in this application to a Deposit Account.

The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1105. I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.  
 assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record. Registration Number \_\_\_\_\_  
 attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 35,487

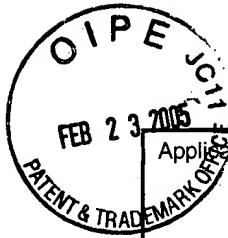
February 23, 2005  
Signature William J. Daley, Jr. Date  
Typed or printed name (617) 439-4444 Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

02/28/2005 HALI11 00000112 041105 09663989

02 FC:2253 510.00 DA



Application No. (if known): 09/663,989

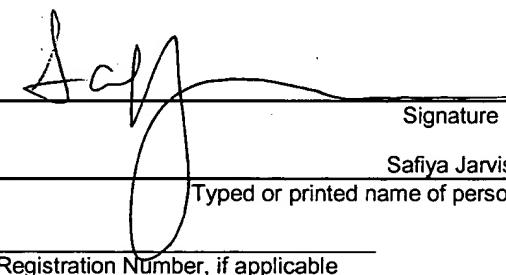
Attorney Docket No.: 55106(71699)

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 492340471 US in an envelope addressed to:

MS RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on February 23, 2005  
Date

Signature

Safiya Jarvis

Typed or printed name of person signing Certificate

  Registration Number, if applicable

(617) 439-4444 Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Three Month Request for Extension of Time Under 37 CFR 1.136(a)  
(1 page)

Request for Continued Examination Transmittal (1 page)

Copy of Previously Filed Amendment

Charge \$905.00 to Deposit Account No. 04-1105

Return Receipt Postcard